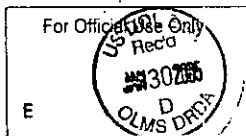


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>5660</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2005</u> Through: <u>12</u> / <u>31</u> / <u>2005</u>
3. Name and address of person filing. Name <u>Gary</u> <u>L</u> <u>Shults</u> P.O. Box, Bldg., Room No., if any <u>Apartment 207J</u> Street <u>2918 Harwood Road</u> City <u>Bedford</u> State <u>Texas</u> ZIP Code + 4 <u>76021</u>	4. Name, file number, and address of labor organization. Name <u>Transport Workers Union</u> Labor Organization File Number <u>111-318</u> <u>000-218</u> P.O. Box, Building and Room Number, if any Street <u>1700 Broadway, Second Floor</u> City <u>New York</u> State <u>New York</u> ZIP Code + 4 <u>10019</u>
5. Position in labor organization. <u>International Representative</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>American Airlines, Inc.</u> Trade Name, if any: P.O. Box, Bldg., Room No., if any Street <u>4333 Amon Carter Blvd</u> City <u>Fort Worth</u> State <u>Texas</u> ZIP Code + 4 <u>76155</u>	7.a. Nature of Interest, Transaction, or Income. <u>TAC pass for air travel. See Attached. Part 7a and 7b</u> 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>[Signature]</u>	On <u>1/19/06</u> Date	<u>212-259-4900</u> Telephone Number

Name of Person Filing Gary Shults

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Rcom No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Rcom No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. **Received from any employer** (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.



Air Transport Division



RE: LM30 Attachment - Section 7a and 7b
LABOR: 000-218
From: Gary L. Shults - Intl Representative
Date: January 20, 2006
TAC Pass Holders

Transport Workers Union

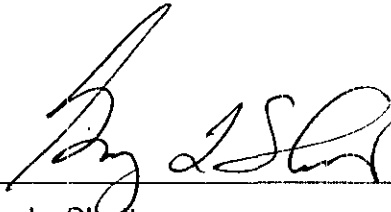
1791 Hurstview Dr
Hurst, TX 76054
Office: 817-282-2544
Fax: 817-282-1906
Email: info@twuatd.org

Answer to Question 7A – Asking for the Nature of the Interest, Transaction, or Income

A TAC pass for airline travel, which permits me to fly for free on American Airlines for business purposes.

Answer to Question 7B – Requesting the Amount of the Interest, Transaction or Income

I used the TAC pass for business travel approximately 3 or 4 times a month during 2005. Airline ticket prices were highly variable over the course of 2005, the approximate value of these flights to me is not reasonably determinable at this juncture.

Signed  on 1/19/06
Gary L. Shults

